PLEASE PRINT CLEARLY OR TYPE ALL INFORMATION

The Commonwealth of Massachusetts

Executive Office of Health and Human Services Department of Public Health State Laboratory Institute

Boston Drug Laboratory Tel (617) 983-6622

Amherst Drug Laboratory Tel (413) 545-2601 Fax (413) 545-2608

Fax (617) 983-6625 **Boston Hours**

Amherst Hours

8:00 - 11:002:00-4:00

DRUG RECEIPT 9:00 - 12:001:00-3:00

City or Department: New Bedford	Police Reference No.: 10-UD-213
Name and Rank of Submitting Officer: Det Kelly A A	Lmeida
Defendant(s) Name (last, first, initial):	
10.07.10	
	8847-OF
To be completed by Submitter Description of Items Submitted	To be completed by Lab Personnel Gross Weight Lab Number
A 3-Tabs (stamped E712)(10-3594-PR)	4,97
③ 3-Tabs (stamped M363) (10-3595-PR)	5,47/1
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Amherst Drug Laboratory Tel (413) 545-2601 Fax (413) 545-2608

Boston Hours 8:00 - 11:002:00-4:00

DRUG RECEIPT

9:00 - 12:001:00 - 3:00

Amherst Hours

City or Department: New Bedford	Police Reference No.: 10-UD-214
Name and Rank of Submitting Officer: Det Kelly A Al	meida
Defendant(s) Name (last, first, initial):	A A A A A A A A A A A A A A A A A A A
11-02-10 10-3784-A	R
To be completed by Submitter Description of Items Submitted	To be completed by Lab Personnel Gross Weight Lab Number
1-Gl Stem w/ Sub Res (10-3761-PR)	8.46
· •	
Received by:	Date: /2-/0

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Boston Hours

Amherst Hours

8:00 - 11:00 2:00 - 4:00	DRUG RECE	9:00 – 12:00 1:00 – 3:00
City or Department: New Be	Police Reference No.: 10-UD-183	
Name and Rank of Submitting	Officer: Det Kelly A Alm	eida
Defendant(s) Name (last, first, in	nitial):	
10-05-10	10-12009-OF	
To be completed by Submitter Description of Items Submitted		To be completed by Lab Personnel Gross Weight Lab Number
1-PB Veg (10-3287-	-PR)	8,98

2 22 22 22 22 22 22 22 22 22 22 22 22 2	1
1-PB Veg (10-3287-PR)	8,98
1-Tab (10-3288-PR)	15,25
2-Tabs (10-3289-PR)	4,15
7-Tabs (10-3290-PR)	8,44
30-Tabs (10-3291-PR) P	29.2
1-Plastic Tray w/ Residue (10-3292-PR)	26,02
1-Blk Plate w/ Residue (10-3293-PR)	358,4

Date:/	12-2-	



